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# EXTENDED TO AUGUST 17, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Form **990-PF** 

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Depa	rtmen	nt of the Treasury				social security numbers on				LU 14
Interr	al Re	venue Service ndar year 2014 (			out For	m 990-PF and its separate	instructions and e		s.gov/form990pf.	Open to Public inspection
		f foundation	JI LAX YEA	ı osymmuş			, anu e	numy	A Employer identification	number
_									06 0440640	
		OHN A. KOZEL CHARITABLE TRUST  Deer and street (or P.O. box number if mail is not delivered to street address)  Room/si							36-3412610	
-		1 175 <b>T</b> H			io street	address)		Room/suite	B Telephone number 701-258-40	00
		own, state or pro		untry, and ZIP or 1 5 8 5 0 3 – 9 2		ostal code			C If exemption application is pe	ending, check here
		all that apply:		Initial return	, ,	Initial return of a fo	rmer public o	harity	D 1. Foreign organizations	, check here
				Fınal return		Amended return			2 Foreign grannizations mad	oting the 0504 test
_				Address change		Name change			Foreign organizations med check here and attach cor	nputation P
H C	-	type of organiza				cempt private foundation	<b>.</b>		E If private foundation stat	
<u> </u>		arket value of all		npt charitable trus		Other taxable private foundang method: X Cash	Accr	mal	under section 507(b)(1)	
		Part II, col. (c),		end of year   3 /		ther (specify)	ACCI	uai	F If the foundation is in a 6 under section 507(b)(1)(	
•	\$			594.16 (Par		mn (d) must be on cash b	asis)		ander section sor (b)(1)	(b), check here
Pa	rt l	Analysis of Re	evenue ar	nd Expenses		(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
· —	1	Contributions,	gifts, gran	ts, etc., received					N/A	
3	2	Check X	f the foundatio	in is not required to attach	Sch B					
	3	Interest on saving cash investments	s and tempe	orary		2,079.53		079.53		STATEMENT 1
SCALATION TO THE REVENUE	4	Dividends and i	nterest fro	om securities		17,742.09	17,	742.09		STATEMENT 2
3	_	Gross rents								
į	ĺ	Net rental income	· · · -			2,703.17				<del>-11/1.11</del>
ne ne	ь	Gross sales price		27,706		2,703.17	<del></del>	·		
Revenue	7	assets on line 6a Capital gain net in	come (from	•	• 50		2	703.17	4	2 2015 0
กะ	8	Net short-term	-						MAY	2 1 2015
	9	Income modific						·		=
	10a	Gross sales less rand allowances	eturns						1-75	7 117
	b	Less Cost of good	ds sold						In Ute	- N
	c	Gross profit or	(loss)						-	
	11	Other income				22 524 70	- 22	<u> </u>		
	12	Total. Add line		<del></del>		22,524.79	22,	524.79 0.00		0.00
	13	Other employee		ectors, trustees, etc		0.00		0.00		0.00
		Pension plans,		•				<del></del>		
es	ļ	Legal fees	op.o., oo	201101110				<del></del>		
ens	1	Accounting fee	s	STMT	3	1,007.50	1,	007.50		0.00
Operating and Administrative Expens	C	Other professio	nal fees					,		
<u>.i.</u>	17	Interest								-
trat	18	Taxes		STMT	4	437.69		0.00		0.00
inis	19	Depreciation an	d depletion	on						
Ę	20	Occupancy								
βĀ	21	Travel, confere		-						
gar	22	Printing and pu Other expenses		STMT	5	95.00		95.00	<u> </u>	0.00
it Li	l	Total operating			,			73.00		- 0.00
)er	-`	expenses. Add				1,540.19	1,	102.50		0.00
ō	25	Contributions,		-		22,200.00	·		7	22,200.00
		Total expense:								
_		Add lines 24 an				23,740.19	1,	102.50		22,200.00
	27	Subtract line 26	6 from line	e 12:		1 01- 15				
	Ι.			nses and disburseme		<1,215.40		422 20		
	ı (	i Net investmen	t income (	(if negative, enter -0-)		1	۷⊥,	422.29	'I	•
		Adjusted net in	neome /-	ogotnia actor A '					N/A	

458,501.70

Form **990-PF** (2014)

6

_	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	83,932.26	92,738.70	92,738.70
3	Accounts receivable ►			
	Less: allowance for doubtful accounts			
4	Pledges receivable			
	Less: allowance for doubtful accounts			
5	Grants receivable			<del> </del>
6		-		<del></del>
	disqualified persons			
۱,	Other notes and loans receivable			
'	Less: allowance for doubtful accounts			
ه ا	Inventories for sale or use	<del></del>		
9	Prepaid expenses and deferred charges			
1,	la Investments - U.S. and state government obligations			
	1			
	b Investments - corporate stock			
1	c Investments - corporate bonds			
יין	Investments - land, buildings, and equipment basis			
١	Less accumulated depreciation			
- 1	Investments - mortgage loans	275 704 04	265 762 00	264 055 46
13	. · · · · · · · · · · · · · · · · · · ·	375,784.84	365,763.00	364,855.46
14	Land, buildings, and equipment; basis			
	Less accumulated depreciation			
15	Other assets (describe )			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	459,717.10	458,501.70	457,594.16
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
20	Mortgages and other notes payable			
22	! Other liabilities (describe ▶ )			
1				
23	Total liabilities (add lines 17 through 22)	0.00	0.00	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 28 and lines 30 and 31.			
3 24	Unrestricted			
2 I	Temporarily restricted			
26	Permanently restricted			
2   - `	Foundations that do not follow SFAS 117, check here	· · · · ·		
3	and complete lines 27 through 31.	·		
5 27		496,749.28	496,749.28	
2 28	_ i	0.00	0.00	
29		<37,032.18>		>
z I		459,717.10	458,501.70	
30	1 Total liet assets of Julia Dalalices	435,717.10	130,301.70	
١,,	Total liabilities and net assets/fund balances	459,717.10	458,501.70	
			450,501.70	
Par	Analysis of Changes in Net Assets or Fund B	alances		
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
-	ust agree with end-of-year figure reported on prior year's return)		1	459,717.10
Ent	er amount from Part I, line 27a		2	<1,215.40
	ner increases not included in line 2 (itemize)		3	0.00
4 Ad	d lines 1, 2, and 3		4	458,501.70

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

F	Part IV   Capital Gains a	and Los	ses for Tax on In	vestmen	t Income			•			
			d(s) of property sold (e.g., r common stock, 200 shs.			( <b>b)</b>	How ac - Purc - Dona	Hase I	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a	MORGAN STANLEY	-JPM	WOAUTO INDEX	X				P :	1/1	4/14	11/24/14
	STIFEL NICOLAU									4/93	09/09/14
	STIFEL NICOLAUS			-CASH	IN LIEU			P .	$\lfloor 1/1 \rfloor$	2/14	11/12/14
d	CAPITAL GAINS	DIVID	ENDS			_					
е	<u> </u>					L.,					
	(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus i	
а		_			25,000.						<166.83
b					3.	13					<0.91
C	ı										7.52
d	2,863.39										2,863.39
е					10/01/00						
	Complete only for assets shown									iol. (h) gain not less thai	
	(i) F.M.V. as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any					(from col. (	h)) ´
а											<166.83
b											<0.91
C											7.52
d				<u>-</u>							2,863.39
е											
2	Capital gain net income or (net cap	pıtal loss)	If gain, also enter If (loss), enter -0-			}	2				2,703.17
3	Net short-term capital gain or (los	•	ed in sections 1222(5) and			٦		·	-		
	If gain, also enter in Part I, line 8, of (loss), enter -0- in Part I, line 8	column (c)	•				3			N/A	
F	Part V   Qualification U	nder Se	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inco	me	,	
(Fo	or optional use by domestic private	foundation	ns subject to the section 4	940(a) tax on	net investment in	come	2.)				
•			•	` '			•				
11 5	section 4940(d)(2) applies, leave th	iis part diai	nk.								
Wa	as the foundation liable for the sect	ion 4942 t	ax on the distributable amo	ount of any ye	ear in the base per	iod?					Yes X No
lf "	Yes," the foundation does not quali	,									
1	Zitte: tite appropriate different in e	ach colum	n for each year; see the in	structions be	fore making any e	ntries					
	(a) Base period years		(b)		Alex I	(c)				Distrib	(d) oution ratio
	Calendar year (or tax year beginnin	ng in)	Adjusted qualifying distr		Net value of no					(col. (b) div	rided by col. (c))
_	2013			100.00				989.00			.048065
	2012			100.00				588.63			.049117
	2011			700.00				784.3			.051693
	2010			200.00 9 <b>47.</b> 79				782.5			.059888
		i	24,	947.79		<u> </u>	00,	891.78	7		.004030
2	Total of line 1, column (d)	-	•						2		.273413
3	Average distribution ratio for the 5	5-year base	e period - divide the total o	n line 2 by 5,	or by the number	of ye	ars				
	the foundation has been in exister	nce if less t	han 5 years						3_		.054683
4	Enter the net value of noncharitab	le-use asso	ets for 2014 from Part X, li	ine 5					4		441,722.67
5	Multiply line 4 by line 3								5		24,154.72
6	Enter 1% of net investment incom	ne (1% of F	Part I, line 27b)						6		214.22
7	Add lines 5 and 6								7		24,368.94
		Dart VII i	uno A								
đ	Enter qualifying distributions from								8	<u>l</u>	22,200.00
	If line 8 is equal to or greater than See the Part VI instructions	line 7, che	ck the box in Part VI, line	1b, and comp	plete that part usin	g a 1	% tax ı	rate.			

Form	990-PF (2014) JOHN A. KOZEL CHARITABLE TRUST		3412			age 4
Ł.	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948	- see i	nstru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					_
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	<u> </u>		428	<u>.45</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				_	~ ~
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	—			.00
3	Add lines 1 and 2	3	├──			.45
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del> </del>			.00
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	├──		420	.45
	Credits/Payments:		1			
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	ł	1			
	Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c  428.45	-				
	· · · · · · · · · · · · · · · · · · ·	4	1			
	Backup withholding erroneously withheld  Table and the second of the sec	١,			120	. 45
	Total credits and payments. Add lines 6a through 6d	7	₩		420	• 4 2
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	┼──			.00
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<del> </del>			• • •
10	Enter the amount of line 10 to be; Credited to 2015 estimated tax	11	<del> </del>			
	rt VII-A   Statements Regarding Activities	_ !!				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın	-		Yes	No
14	any political campaign?			1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	1)2		1b		X
	If the answer is "Yes" to $_{1a}$ or $_{1b}$ , attach a detailed description of the activities and copies of any materials publish			<u>                                     </u>		
	distributed by the foundation in connection with the activities	00 0,		1		
c	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			- <del>``</del>		
_	(1) On the foundation. $\blacktriangleright$ \$ 0.00 (2) On foundation managers. $\blacktriangleright$ \$ 0.00	)				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
•	managers. ►\$ 0.00					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		İ		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law		_		
	remain in the governing instrument?			6		<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	/		7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	L
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	L	X
10	Did any persons become substantial contributors during the tax year? If "Yes." attach a schedule listing their names and addresses			10		X

Forn	1990-PF(2014) JOHN A. KOZEL CHARITABLE TRUST 36-341	2610	Ρ	age 5
Pa	art VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	T		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	$\mathbf{x}$	<del></del>
	Website address ► N/A			
14	The books are in care of ► WILLIAM J. KOZEL  Telephone no. ► 701-2	58-40	000	
	Located at ▶5551 175TH AVE NW, BISMARCK, ND ZIP+4 ▶5			0
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	N/	'A '	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,			No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	'' <u>'</u>		
	foreign country	İ	l	
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		/es	No
1:	a During the year did the foundation (either directly or indirectly):			<del></del>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No		1	
,			1	
	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A			
		1b		
	Organizations relying on a current notice regarding disaster assistance check here			
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1	- 1	v
	before the first day of the tax year beginning in 2014?	1c	$\dashv$	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	
	defined in section 4942(j)(3) or 4942(j)(5)):  At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		j	
•				
	If "Yes," list the years , , , .			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		- 1	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	_		
	statement - see instructions.)  N/A	2b	_	
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38				
	during the year?			
	of "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1.1		an.
	Form 4720, to determine if the foundation had excess business holdings in 2014.)  N/A	3b	$\perp$	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

Form 990-PF (2014) JOHN A. KOZEL CHARITABLE			<u>36-34126:</u>	10 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		[ <del>22</del> ]	
the prevention of cruelty to children or animals?		<del></del>	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	·	n Regulations	27/2	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			ib
Organizations relying on a current notice regarding disaster assistance check h		•		[ ]
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. —	_	
expenditure responsibility for the grant?		I∕A ∐ Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.494.	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	□ v.	s X No	
a personal benefit contract?	perconal hanefit contract?	Y6		Sb X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	rersonal benefit contract?		<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	□ v <sub>e</sub>	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			. –	76
Part VIII Information About Officers, Directors, Trust		nagers Highly		<u> </u>
Paid Employees, and Contractors	oos, i oundation ma	inagoro, riigiii,		
1 List all officers, directors, trustees, foundation managers and their	compensation.			_
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	allowances
WILLIAM J. KOZEL	TRUSTEE			
5551 175TH AVENUE NW				
BISMARCK, ND 58503	0.00	0.00	0.00	0.00
LISA KOZEL	TRUSTEE			
5551 175TH AVENUE NW				
BISMARCK, ND 58503	0.00	0.00	0.00	0.00
	_			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	enter "NONE "	L	
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	l lone.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
N/A	devoted to position		compensation	anovances
W/A	0.00	0.00	0.00	0.00
		1 0.00		
	1			
· · · · · · · · · · · · · · · · · · ·	··· · · ·			
	1			
	1			
	† <del></del>			
\	1			
Total number of other employees paid over \$50,000			<b>D</b>	0

Form 990-PF (2014) JOHN A. KOZEL CHARITABLE TRUST	36-	3412610	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."		<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Co	mpensation
NONE			
	<del>_</del>		
Total number of others receiving over \$50,000 for professional services		<b>—</b>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the	Expens	 es
1 N/A	i, Glu.		•
2			
3			
4			
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amoun	t
1 N/A	1 4110 2.	74110011	<del>`                                    </del>
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3			0.00
TOTAL AND BLOG TRIBURAL S			

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 448,449.41 a Average monthly fair market value of securities 1a b Average of monthly cash balances 1b c Fair market value of all other assets 1c 448,449.41d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0.00 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 448,449.41 Subtract line 2 from line 1d 3 6,726.74 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 441,722.67 Net value of noncharitable-use assets. Subtract line 4 from line 3, Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 22,086.13 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 

and do not complete this part.) 22,086.13 Minimum investment return from Part X, line 6 428.45 2a Tax on investment income for 2014 from Part VI, line 5 2a Income tax for 2014. (This does not include the tax from Part VI.) 2b C Add lines 2a and 2b 2c 428.45 21.657.68 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 0.00 4 5 Add lines 3 and 4 657.68 5 0.00 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 21,657.68 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 22,200.00 1a Program-related investments - total from Part IX-B b 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 22,200.00 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 0.00 5 22,200,00 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7	·			
2 Undistributed income, if any, as of the end of 2014				21,657.68
a Enter amount for 2013 only			0.00	
b Total for prior years:			0.00	
		0.00		
3 Excess distributions carryover, if any, to 2014:		0.00		-
a From 2009   6,157.62				
bFrom 2010 4,579.89				
c From 2011 1,095.83				
dFrom 2012				
e From 2013				
f Total of lines 3a through e	11,833.34			
4 Qualifying distributions for 2014 from	11,000.04			
Part XII, line 4: ►\$ 22, 200.00				
		_	0.00	
a Applied to 2013, but not more than line 2a  b Applied to undistributed income of prior			0.00	·-·
		0.00		
years (Election required - see instructions)		0.00		
c Treated as distributions out of corpus	0.00			
(Election required - see instructions)	0.00			21 657 60
d Applied to 2014 distributable amount	542.32	<u></u>		21,657.68
e Remaining amount distributed out of corpus	0.00			0.00
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.00	<u>-</u>		0.00
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,375.66			
b Prior years' undistributed income. Subtract	,	.,		
line 4b from line 2b		0.00		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.00		
d Subtract line 6c from line 6b. Taxable				<del></del>
amount - see instructions		0.00		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.00	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.00
7 Amounts treated as distributions out of				· · · · · · · · · · · · · · · · · · ·
corpus to satisfy requirements imposed by			,	
section 170(b)(1)(F) or 4942(g)(3) (Election			` <u> </u>	
may be required - see instructions)	0.00			
8 Excess distributions carryover from 2009				.,
not applied on line 5 or line 7	6,157.62			
9 Excess distributions carryover to 2015.	-	<del>"</del>		<del></del>
Subtract lines 7 and 8 from line 6a	6,218.04			
10 Analysis of line 9:				
a Excess from 2010 4,579.89				
b Excess from 2011 1,095.83				
c Excess from 2012				
d Excess from 2013		l		
e Excess from 2014 542.32				
923561 11-24-14				Form 000- DE (2014)

	KOZEL CHAR				112610 Page 10
Part XIV   Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2014, enter the date of t	he ruling	▶ _		
b Check box to indicate whether the found	dation is a private operatir	ig foundation described ii	n section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.				,	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:					
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		· · · · · · · · · · · · · · · · · · ·			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on		}			
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			\ <u></u>		1
an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundat	ion had \$5,000 or m	ore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:			•	
a List any managers of the foundation wh year (but only if they have contributed in	io have contributed more nore than \$5,000). (See s	than 2% of the total cont ection 507(d)(2).)	ributions received by	the foundation before the clo	ose of any tax
NONE					
b List any managers of the foundation whother entity) of which the foundation ha			or an equally large p	portion of the ownership of a	partnership or
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	Scholarship, etc., Pr	ograms:		
				oes not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	iber or e-mail address of t	the person to whom appli	cations should be ac	ddressed:	
WILLIAM J. KOZEL, 70	1-258-4000				
5551 175TH AVENUE NW	, BISMARCK,	ND 58503			
b The form in which applications should WRITTEN APPLICATIONS		tion and materials they sh	nould include:		
c Any submission deadlines:		<del></del>	··· <u>-</u> -		<del></del>
NONE	a guah as hu assassati.	al arosa, chardable fall-	kinds of institution	or other feeters:	<del></del>
d Any restrictions or limitations on award NONE	s, such as by geographic	ai areas, charitadie tieids,	KINGS OF INSTITUTIONS	, or other idctors;	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year AID, INC NONE GENERAL CHARITABLE 314 MAIN ST W PURPOSES MANDAN, ND 58554 1,000.00 AMERICAN LEGION OPEN YOUR HEART NONE GENERAL CHARITABLE PURPOSES PO BOX 753 BISMARCK, ND 58502-0753 500.00 AMNESTY INTERNATIONAL NONE GENERAL CHARITABLE PO BOX 98233 PURPOSES WASHINGTON, DC 20090-8233 2,000.00 BACEF NONE GENERAL CHARITABLE 418 E ROSSER AVENUE #220 PURPOSES BISMARCK, ND 58501 250.00 BOY SCOUTS OF AMERICA NONE GENERAL CHARITABLE 4200 19TH AVE S PURPOSES FARGO, ND 58103 200.00 SEE CONTINUATION SHEET(S) 22,200.00 ➤ 3a Total b Approved for future payment NONE Total 0.00

#### 36-3412610 Page 12 Form 990-PF (2014) Part XVI-A **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) (C) Exclu-sion code (a) Business code (b) Related or exempt (d) Amount Amount function income 1 Program service revenue:

g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash 525990 2,079.53 17,742.09 investments 525990 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other 525990 2,703.17 than inventory

9 Net income or (loss) from special events

0.00

0.00

13

10 Gross profit or (loss) from sales of inventory

11 Other revenue:

12 Subtotal. Add columns (b), (d), and (e)

13 Total. Add line 12, columns (b), (d), and (e)

(See worksheet in line 13 instructions to verify calculations.)

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.  ▼		Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).										
	ALL	TRUST	INCOME	RESULTS	FROM	INVESTMENTS.	_					
		-					_					
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	L											
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22,524.79

22,524.79

JOHN A. KOZEL CHARITABLE TRUST 36-3412610 Form 990-PF (2014) Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: X (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (5) Loans or loan guarantees X 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a)Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization N/A May the IHS discuss the return with the preparer Sign below (see instr )? Here X Yes Signature of officer or trustee Title Date Print/Type preparer's name Date Check Preparer's signature

Form **990-PF** (2014)

P00484329

Firm's EIN ► 45-0365414

Phone no. (701) 258-4000

self- employed

c0A05/04/15

Paid

Preparer

**Use Only** 

CASEY HEINERT.

Firm's name ► TSCHIDER & SMITH

CPA

BISMARCK, ND 58501-4085

Firm's address ▶ 418 EAST ROSSER AVENUE

Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CATHOLIC RELIEF SERVICES NONE GENERAL CHARITABLE PURPOSES 228 W LEXINGTON ST 3,000.00 BALTIMORE, MD 21201-3443 GENERAL CHARITABLE NONE CENTRAL DAKOTA HUMANE SOCIETY 2104 37TH STREET PURPOSES MANDAN, ND 58554 500.00 NONE GENERAL CHARITABLE CHILD'S HOPE LEARNING CENTER PURPOSES 2921 N 19TH STREET 500.00 BISMARCK, ND 58501 COMMON HOPE NONE GENERAL CHARITABLE PURPOSES PO BOX 8228 2,000.00 ST PAUL, MN 55108 DOCTORS WITHOUT BORDERS, USA NONE GENERAL CHARITABLE 333 7TH AVE 2ND FLOOR PURPOSES NEW YORK, NY 10001 5,000.00 GENERAL CHARITABLE HEARTVIEW FOUNDATION NONE PURPOSES 101 EAST BROADWAY AVE 1,000.00 BISMARCK, ND 58501 JILLIAN'S HAVEN ANIMAL RESCUE NONE GENERAL CHARITABLE PURPOSES PO BOX 56 500.00 MANDAN, ND 58554 GENERAL CHARITABLE MAKE-A-WISH FOUNDATION NONE PURPOSES 1102 43 STREET S, SUITE E 500.00 FARGO, ND 58102 NONE GENERAL CHARITABLE ND ELKS CAMP GRASSICK PURPOSES PO BOX F 500.00 DAWSON, ND 58428-0005 PAX CHRISTI NONE GENERAL CHARITABLE PURPOSES 415 MICHIGAN AVE NE STE 240 WASHINGTON, DC 20017-4503 500.00 18,250.00 Total from continuation sheets

Part XV

Supplementary Information

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Purpose of grant or contribution Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient RED CROSS-BURLEIGH-MORTON COUNTY, ND NONE GENERAL CHARITABLE PURPOSES 4007 STATE STREET 250.00 BISMARCK, ND 58501 NONE GENERAL CHARITABLE RUTH MEIERS HOSPITALITY HOUSE PURPOSES PO BOX 2092 500.00 BISMARCK, ND 58502 GENERAL CHARITABLE NONE SALVATION ARMY PURPOSES 601 S WASHINGTON STREET 1,000.00 BISMARCK, ND 58504 SIERRA CLUB FOUNDATION NONE GENERAL CHARITABLE PURPOSES 311 N MANDAN ST 500.00 BISMARCK, ND 58501 GENERAL CHARITABLE ST BERNARD MISSION SCHOOL NONE PURPOSES 1 MISSION DR 1,000.00 FT YATES, ND 58538 ST MARY'S GRADE SCHOOL NONE GENERAL CHARITABLE PURPOSES 807 E THAYER AVE BISMARCK, ND 58501 1,000.00 Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
MORGAN STANLEY SMIT STIFEL NICOLAUS	H BARNEY		204.53 875.00		1,204.53 875.00	
TOTAL TO PART I, LI	NE 3	2,	079.53	-	2,079.53	
FORM 990-PF	DIVIDENDS	S AND INTER	EST FR	OM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM	
MORGAN STANLEY SMITH BARNEY STIFEL NICOLAUS T. ROWE PRICE	2,072.19 16,551.97 1,981.32	1,415.	20 1	2,072.19 5,136.77 533.13	15,136.	77
TO PART I, LINE 4	20,605.48	2,863.	39 1	7,742.09	17,742.	09
FORM 990-PF		· ACCOUNTI	NG FEE	S		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
TAX PREP		1,007.50	1	,007.50		0.00
TO FORM 990-PF, PG	 1, LN 16B	1,007.50	1	,007.50		0.00

FORM 990-PF	TAX	ES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
IRS 2013 FOREIGN TAXES	437.69 0.00		00	0.00		
TO FORM 990-PF, PG 1, LN 18	437.69	0.	00	0.00		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
ACCOUNT FEES	95.00	95.	00	0.00		
TO FORM 990-PF, PG 1, LN 23	95.00	95.	00	0.00		
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6		
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE		
INVESTMENT ACCOUNTS	-	COST	365,763.00	364,855.46		
TOTAL TO FORM 990-PF, PART I	I, LINE 13		365,763.00	364,855.46		

## Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

-							
a 16	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			$\triangleright \mathbf{X}$	
− пyou a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
Do not coi	mplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previou	sly filed Fo	rm 8868.		
Electronic	c filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of til	ne to file (	6 months t	or a corporation	
required to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically	file Form 8	868 to req	uest an extension	
	file any of the forms listed in Part I or Part II with the exc		•		-		
Personal F	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the ele	ctronic filin	g of this form,	
	irs gov/efile and click on e-file for Charities & Nonprofits		•			, ,	
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
A corpora	tion required to file Form 990-T and requesting an autor						
Part I only						▶ □	
	orporations (including 1120-C filers), partnerships, REM me tax returns.	IICs, and t	rusts must use Form 7004 to reque				
Type or					Enter filer's identifying number Employer identification number (EiN) or		
print							
File by the	JOHN A. KOZEL CHARITABLE TRUST				36-3412610		
due date for	te for Number, street, and room or suite no. If a P.O. box, see instructions.			Social security number (SSN)			
filing your return See	5551 175TH AVENUE NW						
instructions	Orty, town or post office, state, and ZIP code. For a foreign address, see instructions						
	BISMARCK, ND 58503-9270						
Enter the f	Return code for the return that this application is for (file	e a separa	te application for each return)			04	
Application		Return	Application		•	Return	
s For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)				
Form 990-BL		02	Form 1041-A				
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
rom 990-	Form 990-T (sec. 401(a) or 408(a) trust)		Form 6069			44	
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-	T (trust other than above)	06	Form 8870	-		12	
Form 990- Form 990- The boo Telepho	T (trust other than above)  WILLIAM J. KOZE  oks are in the care of $\triangleright$ 5551 175TH AVE  one No $\triangleright$ 701-258-4000  rganization does not have an office or place of business	06 <b>EL NW</b> –	Form 8870  BISMARCK , ND 5850  Fax No. ▶  iited States, check this box			. ▶ □	
Form 990-  The boo Telepho  If the or	T (trust other than above)  WILLIAM J. KOZE  oks are in the care of $\triangleright$ 5551 175TH AVE  one No $\triangleright$ 701-258-4000  rganization does not have an office or place of business of or a Group Return, enter the organization's four digit of the second seco	06  L NW - s in the Ur Group Exe	Form 8870  BISMARCK, ND 5850  Fax No.   ited States, check this box emption Number (GEN)	If this is fo	r the whole	. ▶ □	
Form 990- Form 990- The boo Telepho If the oi If this is	T (trust other than above)  WILLIAM J. KOZE  oks are in the care of ▶ 5551 175TH AVE  one No ▶ 701-258-4000  rganization does not have an office or place of business is for a Group Return, enter the organization's four digit of  If it is for part of the group, check this box ▶	06  NW -  s in the Ur  Group Exe	Form 8870  BISMARCK, ND 5850  Fax No.   iited States, check this box emption Number (GEN)  ch a list with the names and EINs o	If this is fo f all memb	r the whole	. ▶ □	
Form 990- Form 990- The boo Telepho If the oi If this is	T (trust other than above)  WILLIAM J. KOZE  oks are in the care of ▶ 5551 175TH AVE  one No ▶ 701-258-4000  rganization does not have an office or place of business for a Group Return, enter the organization's four digit of  If it is for part of the group, check this box ▶ □  juest an automatic 3-month (6 months for a corporation)	06 L NW - s in the Ur Group Exe and atta required	Form 8870  BISMARCK , ND 5850  Fax No.   inited States, check this box emption Number (GEN)  ch a list with the names and EINs of the file Form 990-T) extension of times.	If this is fo f all memb	the whole	. ▶ □ e group, check this tension is for.	
Form 990- Form 990- The book Telepho If the or If this is Book  I I req	T (trust other than above)  WILLIAM J. KOZE  oks are in the care of ▶ 5551 175TH AVE  one No ▶ 701-258-4000  rganization does not have an office or place of business of for a Group Return, enter the organization's four digit of the group, check this box ▶  uest an automatic 3-month (6 months for a corporation AUGUST 15, 2015, to file the exemptions.)	06 L NW - s in the Ur Group Exe and atta required	Form 8870  BISMARCK, ND 5850  Fax No.   iited States, check this box emption Number (GEN)  ch a list with the names and EINs o	If this is fo f all memb	the whole	. ▶ □ e group, check this tension is for.	
Form 990- Form 990- The book Telepho If the oil If this is Dox I I require is for	WILLIAM J. KOZE  oks are in the care of ► 5551 175TH AVE  one No ► 701-258-4000  rganization does not have an office or place of business of for a Group Return, enter the organization's four digit of the group, check this box ►  illust an automatic 3-month (6 months for a corporation AUGUST 15, 2015  r the organization's return for:	06 L NW - s in the Ur Group Exe and atta required	Form 8870  BISMARCK , ND 5850  Fax No.   inited States, check this box emption Number (GEN)  ch a list with the names and EINs of the file Form 990-T) extension of times.	If this is fo f all memb	the whole	. ▶ □ e group, check this tension is for.	
The book Telepho If the oil If this is DOX I req Is fo	WILLIAM J. KOZE  oks are in the care of ► 5551 175TH AVE  one No ► 701-258-4000  rganization does not have an office or place of business of or a Group Return, enter the organization's four digit of the group, check this box ►  lift is for part of the group, check this box ►  luest an automatic 3-month (6 months for a corporation AUGUST 15, 2015  r the organization's return for:  X calendar year 2014 or	06 IL NW – s in the Ur Group Exe and atta required torganiza	Form 8870  BISMARCK, ND 5850  Fax No.   iited States, check this box emption Number (GEN)  ch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization name	If this is fo f all memb	the whole	. ▶ □ e group, check this tension is for.	
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